

ABSTRACT

CONTEXT: Thyroid dysfunction during pregnancy is associated with various adverse outcomes. Certain organisations advocate universal screening but some organisation advocate targetted case finding by screening only high risk cases.

OBJECTIVE: The objective of the study was to To substantiate the need for universal thyroid screening in pregnancy and To find the incidence of undiagnosed thyroid disorders which would be missed by case finding approach And To study the outcome of patients with thyroid disorders both with adequate and inadequate treatment.

DESIGN/SETTING : This was a single centre prospective study. 400 pregnant patients were screened during their first trimester visit to AN OP with TSH, free T4, freeT3. Patients with known thyroid dysfunction were excluded from the study. The risk factors if any were noted down like family history, symptoms of thyroid disorder, recurrent abortion, residence in hilly areas, obesity, autoimmune disorders. The patients were then analysed as belonging to high risk or low risk group and the thyroid function results were analysed. And was examined whether testing only such a high risk group would pick up most pregnant women with thyroid dysfunction

RESULTS: Of the 400 patients, 60 patients had abnormal thyroid profile and 38 had risk factors but 22 had no risk factors. On analysis the chi square value was 247.334 and p value was <0.001 which was statistically significant .The adverse outcomes were less in the adequately treated group compared to inadequately treated group.

CONCLUSION Targetted thyroid function testing of only the high risk group would miss one third of patients with thyroid dysfunction and

hence universal thyroid screening must be advocated in countries like India which have high incidence of thyroid dysfunction.

Key words : Thyroid dysfunction, universal screening, recurrent abortion, Auto immune disorders, first trimester